## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**CLAIMS AS FILED - PART I** 

Application or Docket Number

OTHER THAN

09/937406

**SMALL ENTITY** 

|  |  | (Column 1)                                |                                       | (Column 2)       |                              | T                | TYPE  |            | OR                     | OR SMALL ENTIT |            |  |
|--|--|---|---------------------------------------|------------------|------------------------------|------------------|-------|------------|------------------------|----------------|------------|--|
| TOTAL CLAIMS   |  |   |                                       |                  |                              |                  |       | RATE       | FEE                    |                | RATE       | FEE  |
| FOR  |  |   | NUMBER FILED                          |                  | NUMBER EXTRA                 |                  |       | BASIC FEE  | 355.00                 | OR             | BASIC FEE  | 716.60   |
| TOTAL CHARGEABLE CLAIMS  |  |   | 26 minus 20=                          |                  | *                            |                  |       | X\$ 9=     |                        | OR             | X\$18=     |  |
| INDEPENDENT CLAIMS   |  |   | 4 minus 3 = *                         |                  | • 1                          |                  |       | X40=       |                        | OR             | X80=       | 80   |
| MULTIPLE DEPENDENT CLAIM PI  |  |   | RESENT                                |                  |                              |                  | Ì     | +135=      |                        | OR             | +270=      |  |
| * If   | the difference i                               | in column 1 is                            | less than zero, enter "0" in column 2 |                  |                              | l                | TOTAL |            | OR                     | TOTAL          | 940        |  |
|  | CL   | AIMS AS A                                 | MENDED                                | MENDED - PART II |                              |                  |       |            |                        |                | OTHER      |  |
|  |  | (Column 1)                                | (Column 2) (Column 3)                 |                  |                              |                  |       | SMALLE     | NTITY                  | OR .           | SMALL      | ENTITY   |
| AMENDMENT A  | <b>)</b>                                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | PREVI            | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |       | RATE       | ADDI-<br>TIONAL<br>FEE |                | RATE       | ADDI-<br>TIONAL<br>FEE                           |
|  | Total  | *   | Minus                                 | **               |                              | =                |       | X\$ 9=     |                        | OR             | X\$18=     |  |
|  | Independent                                    | •   | Minus                                 | ***              |                              | =                |       | X40=       |                        | OR             | X80=       |  |
| L  | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEP                           | ENDEN            | CLAIM                        |                  |       | +135=      |                        | OR             | +270=      |  |
|  |  |   |                                       |                  |                              |                  |       | TOTAL      |                        |                | TOTAL      |  |
|  | (Column 1) (Column 2) (Column 3)               |   |                                       |                  |                              |                  |       | ADDIT. FEE |                        | ]              | ADDIT. FEE |  |
| AMENDMENT B  | 7. J. 7. E                                     | (Column 1)<br>CLAIMS                      |                                       | HIG              | HEST                         | (Column 5)       | 1     |            | ADDI-                  | 1              | <u> </u>   | ADDI-  |
|  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | PREV             | MBER<br>IOUSLY<br>FOR        | PRESENT<br>EXTRA |       | RATE       | TIONAL<br>FEE          |                | RATE       | TIONAL<br>FEE                                    |
|  | Total  | *   | Minus                                 | **               |                              | =                | ]     | X\$ 9=     |                        | OR             | X\$18=     |  |
|  | Independent                                    | *   | Minus                                 | ***              |                              | <u> -</u>        |       | X40=       |                        | OR             | X80=       |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                  |                              |                  | ן נ   | +135=      |                        | OR             | +270=      |  |
|  |  |   |                                       |                  |                              |                  |       | TOTAL      |                        | OR             | TOTAL      |  |
|  |  |   |                                       |                  |                              |                  |       | ADDIT. FEE |                        |                | ADDIT. FEE |  |
| _  |  | (Column 1)<br>CLAIMS                      | 10.8 32.440 cm s                      |                  | ımn 2)<br>HEST               | (Column 3)       | ٦.    |            |                        | ,              |            |  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUI<br>PREV      | MBER<br>IOUSLY<br>D FOR      | PRESENT<br>EXTRA |       | RATE       | ADDI-<br>TIONAL<br>FEE |                | RATE       | ADDI-<br>TIONAL<br>FEE                           |
|  | Total  |   | Minus                                 | **               |                              | =                |       | X\$ 9=     |                        | OR             | X\$18=     |  |
|  | Independent                                    | *   | Minus                                 | ***              | IT CL                        | =                |       | X40=       |                        | OR             | X80=       |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                  |                              |                  |       | +135=      |                        | 1              | +270=      |  |
|  | If the entry in colu                           | mn 1 is less than                         | the entry in colu                     | ımn 2, wr        | ite "0" in co                | olumn 3.         |       | TOTAL      | <b> </b>               | OR             | TOTAL      | <del>                                     </del> |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                       |                  |                              |                  |       |            |                        |                |            |  |